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CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

RECEIVED
AIR POLITICAL COVER PAGE
PRACTICES COMMISSION

CITY CLERK

2011 MAR 25 AM 10: 55

Please type	e or print in ink.	LIND 7 PM	12: 1.2	•	TOTT THE CS AM IU: 55
NAME OF FILE	R	(LAST)	14.	(FIRST)	(MIDDLE)
		WEAVER		David	Gerhardt
1. Office,	, Agency, or Co	urt			
Agency	Name				
	Council				****
	Board, Department, D	District, if applicable		Your Position	
	ale City Council			City Councilman	
•	• •	i, list below or on an attachm			
Agency:	Redevelopment	Agency/Housing Auth	ority	Position: Agency men	nber/Authority member
2. Jurisc	diction of Office	(Check at least one box)			
☐ State)			Judge (Statewide Jurisdi	ction)
	•			County of	
City	of Glendale			Other	
3. Type	of Statement (ci	neck at least one box)			
⊠ Ann 2010		red is January 1, 2010, throu	gh December 31,	Leaving Office: Date I (Check one)	.eft/
	The period covered is 2010.	/, throug	jh December 31,	 The period covered leaving office. 	is January 1, 2010, through the date of
☐ .Ass	uming Office: Date			 The period covered of leaving office. 	is, through the date
☐ Can	didate: Election Year	· Off	ice sought, if different	than Part 1:	
	lule Summary				
Check a	pplicable schedules	or "None."	► Total	number of pages including	this cover page:
		nts – schedule attached		•	& Business Positions - schedule attache
		nts - schedule attached		chedule D - Income - Gifts	
ட эமா	euule = Nedi Fiopei	rfy - schedule attached	_	chedule = • Income - UMS	- Travel Payments - schedule attached
		None - No	-or- reportable interests or	any schedule	
- \/'C	_45				
5. Verifica	ation				
		, . ,			
Date Sig	1160	ch 25, 2011	Signati		
	(mc	onth, day, year)			

1100 30

SCHEDULE D Income - Gifts

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

David G. WEAVER

► NAME OF SOURCE	E		► NAME OF SOURCE	E		
Forest Lawn						
ADDRESS (Busines	ss Address Acceptat	ole)	ADDRESS (Business Address Acceptable)			
6300 Forest L	awn Drive, Lo	s Angeles, CA 90068				
BUSINESS ACTIVIT	TY, IF ANY, OF SOL	RCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE			
Cemetery						
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	
12 , 17 , 10	\$150.00	Poinsettia plant		\$		
	\$			\$		
	\$			\$		
NAME OF SOURCE	E		► NAME OF SOURCE	E		
ADDRESS (Busines	ss Address Acceptat	le)	ADDRESS (Business Address Acceptable)			
BUSINESS ACTIVIT	IY, IF ANY, OF SOL	RCE	BUSINESS ACTIV	ITY, IF ANY, OF S	SOURCE	
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	
	\$			\$		
	\$			\$		
	\$			\$		
► NAME OF SOURCE	Ē		► NAME OF SOURCE	E		
ADDRESS (Busines	ss Address Acceptab	le)	ADDRESS (Business Address Acceptable)			
BUSINESS ACTIVIT	TY, IF ANY, OF SOU	RCE	BUSINESS ACTIVI	TY, IF ANY, OF S	GOURCE	
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	
				\$		
	\$			\$		
	\$			\$		
Comments:					****	